

**Please Complete this form and Email or Send with payment:**

**Elite Baseball Academy**

**728 E. 136th Street, Bronx, NY 10454**

**Tel: (718)292-1234 or (718) 690-1274**

**Web:** [**www.nycsluggers.com**](http://www.nycsluggers.com/)

**Age 12U - 2019 Summer Season**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates:** | **Summer Season** | **Where:** | **Cost:** |
|  Summer Season June 25 - Aug 15 2019 | **18 League Games****\* Hot Stove League****3 Travel Tournaments****2 Weekly Team Practice****Tues- Thurs****2 Pro Games Yankees/Mets****\*\* 1-2 Weekly Games****2 DH Sat/Sun** | Randall’s Island Park Various Long Island Baseball ParkS NY Sluggers Baseball Academy\*Pickups and Drop offs **\*Pick up locations:**East side 86th street and Park Ave.3:30 to 3:45 P.M.Westside 86th street and CPW3:30 to 3:45 P.M.\* Drop Off The Same  | $1,600 |

**Personal Information:**

Child’s Name (first, last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_ Zip:\_\_\_\_\_\_

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Payment Information: Full payment due with registration**

Total cost ($1,600.00 per player):

If Payment by check or Money Order make payable to: Elite Baseball Academy Inc.

Paypal / Credit Card Also Accepted !!!!!!

**Parental Consents**

 Cancellation Policy: Please note that a $50.00 processing fee will be charged for any cancellation of registration prior to the start date. There will be no refunds for travel baseball, only for Elite camps. Also, once your child has attended three sessions or more of a program, no refunds will be given unless due to injury, in which case a doctor’s note is required. If your child has only attended one or two sessions and decides he or she does not like the program, a prorated refund will be given minus a $50.00 processing fee. There will be no refunds after the third session has been attended.

As parent or legal guardian of the above applicant, I hereby consent to his/her participation in any and all activities in Elite Baseball Academy and agree to abide by all rules and regulations of the institution. In consideration of Elite Baseball Academy accepting this registration and permitting the participation of above applicant, which I believe would be of educational, physical and other benefits, I assume all risks and hazards incidental in participation in all activities. I hereby release, discharge, indemnify and hold harmless Elite Baseball Academy, its officials, coaches, representatives and all persons transporting my child/dependent to and from activities from any and all claims, actions and liability arising out of or in connection with my child’s participation in any aspect of Elite Baseball Academy, whether or not such injury is caused by the negligence, willful conduct or other inaction of the indemnities. I certify that he/she is in good health and able to participate in all activities and in the case of emergency affecting my child, I hereby give permission for a physician or hospital designated by Elite Baseball Academy to administer treatment to my child. I also understand that Elite Baseball Academy has a no refund, no credit policy for any reason at any time for any programs unless Elite Baseball Academy is unable to deliver the program.